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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number 09/921,465

Filing Date August 3, 2001

First Named Inventor Czech, et al.

Art Unit 1734

Examiner Name G. Koch

Attorney Docket Number 11694/04101

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	A check in the amount of \$450.00
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 03-0172.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name			
Signature			
Printed name	Leonard L. Lewis		
Date	June 13, 2005	Reg. No.	31,176

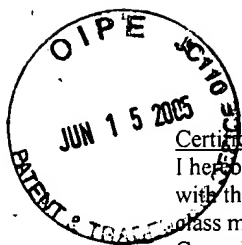
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Signature			
Typed or printed name	Wendy A. Frick	Date	June 13, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Wendy A. Frick
Wendy Frick

Customer Number

27483

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:)	Examiner:	G. Koch
Czech et al.)		
)		
Serial No.:)	Art Unit:	1734
09/921,465)		
)		
Filed:)	Confirmation No.:	7030
August 3, 2001)		
)		
For:)	Attorney Docket No.:	11694/04101
SYSTEM FOR CONFIGURING A)		
MATERIAL APPLICATION SYSTEM)		
OVER THE INTERNET (as previously amended))		
)		

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE TO OFFICE ACTION

Dear Sir:

In response to the Office action mailed on January 21, 2005, Applicants hereby amend the claims and otherwise respond as follows. The shortened statutory period for response expired on April 21, 2005, accordingly Applicants hereby petition for a two month extension of time. A check is enclosed in the amount of \$450.00 for payment of the two month extension of time. The extended due date for this response therefore is June 21, 2005. It is believed that there is no additional fee associated with the filing and consideration of this amendment, however, **should the Commissioner decide that any fee or fee deficiency is due, the Commissioner is hereby authorized to charge any and all fees incurred as a result of entering this amendment and response to deposit account number 03-0172.**

Please amend the application as follows:

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